

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F02000005799

**Entity Name:** ENCHOICE, INC.

**Current Principal Place of Business:**

11044 RESEARCH BLVD  
STE B220  
AUSTIN, TX 78759

**FILED**  
**Mar 30, 2024**  
**Secretary of State**  
**7211240649CC**

**Current Mailing Address:**

8911 N. CAPITAL OF TEXAS HWY.  
SUITE 4200  
AUSTIN, TX 78759 US

**FEI Number: 01-0639774**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

BUSINESS FILINGS INCORPORATED  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** CHRIS DAS

03/30/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name DITALLO, DARIUS J  
Address 8312 E CALLE DE ALEGRIA  
City-State-Zip: SCOTTSDALE AZ 85255

Title DIRECTOR  
Name HOFFMAN, CLARK  
Address 6107 MESA DR  
City-State-Zip: AUSTIN TX 78731

Title DIRECTOR  
Name PARKS, DAVE  
Address 2733 SHIRE RIDGE DR  
City-State-Zip: AUSTIN TX 78732

Title DIRECTOR  
Name CRANDALL, WAYNE  
Address 9921 E DOUBLETREE RANCH ROAD  
City-State-Zip: SCOTTSDALE AZ 85258

Title DIRECTOR  
Name DITALLO, DARIUS  
Address 8312 E CALLE DE ALEGRIA  
City-State-Zip: SCOTTSDALE AZ 85255

Title DIRECTOR  
Name CURRY, BRIAN  
Address 625 VILLAGE WAY  
City-State-Zip: PALM HARBOR FL 34683

Title DIRECTOR  
Name WHITE, ANTONY G  
Address 115 CASITAS BULEVAR  
City-State-Zip: LOS GATOS CA 95032

Title TREASURER  
Name CURRY, BRIAN  
Address 625 VILLAGE WAY  
City-State-Zip: PALM HARBOR FL 34683

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*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** DAVE PARKS TITLE: PRESIDENT

03/30/2024

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title            PRESIDENT  
Name            PARKS, DAVE  
Address        2733 SHIRE RIDGE DR  
City-State-Zip: AUSTIN TX 78732

Title            DIRECTOR  
Name            HOLLEY, KERRIE  
Address        34 OAKHURST ROAD  
City-State-Zip: SAN RAFAEL CA 94901